PTO/SB/81 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## POWER OF ATTORNEY And CORRESPONDENCE ADDRESS **INDICATION FORM**

Application Number	displays a valid CMID control number
Filing Date	
First Named Inventor	Ola PETTERSEN
Title	A Novel Connecting Piece of Electrically Conducting Material
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	49741.12.1

	Attorney Docket Number 49741.12.1				
I hereby revoke all previous powers of attorney given in the above-identified application					
1 hereby appoint:					
Practitioners at (	ustomer Number 022859				
OR			039		
Practitioner(s) named below:					
Name			Registration Number		
			~~B1001 41	icion ((dinoc)	
	1.				
as my/our attorney(s) or	agent(s) to prosecute the appli	ication idea	4:C 1 1		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
Please recognize or change the correspondence address for the above-identified application to:					
☐ The address associat	ed with the above-mentioned C	ustomer No	c-ideiliffied applic	cation to:	
OR					
The address associated	ed with Customer Number:		I		
OR					
Firm or		L			
Individual Name					
Address Address					
City				· · · · · · · · · · · · · · · · · · ·	
Country		Stat	e	Zip	
Telephone					
I am the:		Fax			
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applitualit or Assignee of Record					
Signature	The state of the s	line	Date		
Name	Forsten Backur	an is he	Telephone	2/11 05	
Title and Company	Safetrack Infrasystems SISAE	RAR	1 relephone	040-445551	
NOTE: Signatures of all the inventors or assignees of record of the					
▼T-4-1 - C					
□ forms are submitted					

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450